

MEMBERSHIP APPLICATION/RENEWAL 2020

Please print your details be	elow:	
Title:		
First Name:	Surr	name:
Address:		
Post code:		_
Home telephone number:		Mobile number:
Email address:		
Membership requested: please tick category below ✓		
Full member £50	Student* £20	Friend £20
[*enrolled on a certificated botanical art course]		
I enclose my cheque for	£ ma	de payable to the SSBA
OR by bank transfer to Sort code 80-22-60. Account no. 13727960		
Please put your name and MEMBERSUB as reference.		
Additional donations are most welcome: £		
Ciamatana	Dete	of Joining/Donousely
Signature:	_ Date	of Joining/Renewal:
♣ PLEASE POST or email TO SSBA Treasurer:		
Dr. Kate Braithwaite, 9 Manse Brae, Dalserf, Larkhall, Lanarkshire, ML9 3BN		
katebraithwaite@btinternet.com		

Membership is renewed annually in January.

I DO / DO NOT authorise my email address to be used for email correspondence from the SSBA and shared with other members only to share information about events, transport to meetings, courses and exhibitions.